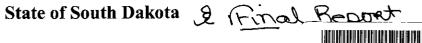
Remunation Appendix B



Candidate's or Committee's Report of Receipts and Expend



Candidates and candidate committees: File in the office where you filed your nominating petition.	RECEIVED
PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070	JAN 2 3 2004
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.	S.D. SEC. OF STATE
Name of Candidate or Committee Steve Hirby (Hirby For Gover)	rur
Complete Mailing Address 122 9. Phillips ave., Ste. 300 Sinw	Falls, 30 57104
Name of Person Making Report Lynne Steel Daytime Phone Number C	605.331.0091
If you are a candidate, what office are you seeking? whe	
If you are a ballot question committee, indicate which measure(s) the committee was involved reporting period and whether the measure was supported or opposed.	d with during the
Type of Report (See pages 4 & 5 of Guideline Book) Final Report	
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) \2-3\-03	
The following verification must be completed before submitting report.	••••••
VERIFICATION OF PERSON MAKING REPORT	
I	have examined
Date: 1-21-04 Candidate Signature or Signature of Committee Treasurer or Chairperson	n
Revised July 2001 Chi No SECRETARY O	PERSTATE

Name of Candidate or Committee Steve Hirby Birby fire Governore For the reporting period ending 12-31-03 (Final Report

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from Individuals:			*\$ \$		
Itemized Contributions from Individual	uals				
Name	Residence Address	Place of Employment (Name of Employer)			
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
		and age and the state of the st	\$		
			\$		
			\$		
Total of Itemized Contributions from	ı Individuals:		*\$ \(\sqrt{\phi}\)		

For the reporting period ending 12-31-03 First Report

Schedule A – Direct Contributions (continued)

Unitemized Contributions from Political Parties:		*\$	ф
Itemized Contributions from Political Parties			
Party Name	Address		
		\$	
		\$ <u></u>	
Total of Itemized Contributions from Political Parties:		*\$	Φ
Itemized Contributions from Political Action Committees (PAC PAC Name	Address		
		\$	
		\$	
		\$	
		\$ <u></u>	
		\$	
		\$	
		\$	
Total of Itemized Contributions from Political Action Committ	ees:	*\$	
Fotal of All Direct Contributions (Sum of all lines with an *)		\$	Ø

Appendix B

Name of Candidate or Committee:	leve brown the printe	n Spirenne
For the reporting period ending: 12-3	1-03 Final Robert	
	- Fund-Raising Events Proceeds	
List on this schedule fund-raising events held to raise contributor gives more than \$100 or their contributions must be itemized on Schedule A.	se money for the candidate and the net proceeds	derived from each event. If a
Type or Name of Event		Net Proceeds
		11001100003
	AND ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED.	
A		WESTERNISSEN STATES STA
Total:		——Ф
Report all non-cash contributions of goods or service contributor, residence address and place of employr		lue exceeds \$100, the name of the
Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
		And the state of t
	PPOP 9/4/1/1988 88 N. P. J.	
Total:		Φ
		,
Use this schedule to report any refunds, interest ear	nedule D - Other Income ned or other income which is not a direct contribu	ution.
Source of Income		Amount
	11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11.00.11	
	1934N-1011-4	
Total:		Ф

Name of Candidate or Committee:					<u>~</u>
For the reporting period ending:	12-31-0	3/Fine P	COORT)	

Expenses		Contributions Made to Candidates and Committees	
Item	Amount	Name of Candidate or Committee	Amount
Advertising			
Consulting			
Postage	2011 22000 SET 1120 S		
Printing			
Rent			
Salaries	: : : : : : : : : : : : : : : : : : :		
Felephone			
[ravel	-		
Utilities	i	<u> </u>	
List other expense	List other expense		
tems below	amounts below		
Jeinbursene	d 93,215.12		
to steve time			
J. J			
		<u> </u>	
- 4			
	7 11 Maria Care 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE STATE OF THE S	
V			
		T WY T BEEN	
- 			
WY-2	:		·
		10.430,241,440	
	 		
	<u> </u>		

Appendix B

Name of Candidate or Committee: Steve Hirby (Kirby For Governor)

For the reporting period ending: 12-31-03 Final Report

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

wed to:	Purpose:	Amount
<u> </u>		

		I

Appendix B

Na	me of Candidate or Committee: <u>St</u>	We Hirray (thirthy LOR	Governos
Fo	r the reporting period ending: <u>\るく</u> ろ\(03/1Final Appoint	
	s summary sheet will give a brief outline of all can in the schedules previously completed.	Summary Page inpaign finance activity during this reporting period.	Please transfer all totals
l.	Amount on hand, if any, at the beginning	g of the reporting period:	\$ 03,215.12
2.	Receipts		
	Schedule A - Direct Contributions	\$	
	Schedule B - Fund-Raising Events	\$	
	Schedule C - In Kind Contributions	\$	
	Schedule D - Other Income	\$	
	Total of all Receipts	s <u> </u>	
3.	Total Monetary Receipts (A+B+D)		\$Ф
4.	. Candidate's Personal Contribution to Own Campaign		\$ <u> </u>
5.	Monetary Loans to Candidate or Commi	ttee During Reporting Period	\$ф
5.	. Monetary Loans Repaid During Reporting Period		\$
7.	Expenditures - Schedule E		\$ <u>93</u> ,215.12

\$<u></u>

8. Unpaid Obligations - Schedule F

9. Amount on hand at the close of this reporting period. * This should equal lines (1+3+4+5)-(6+7)

Appendix C

Secretary of State

State Capitol, Ste 204 500 East Capitol Avenue Pierre, South Dakota 57501-5070 sdsos@state.sd.us



Chris Nelson
Secretary of State

Chad Heinrich Deputy

State of South Dakota

Voluntary Statement of Organization for a Political Action or Ballot Question Committee

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filing.

FULL NAME OF COMMITTEE:	
MAILING ADDRESS:	
COMMITTEE TREASURER:	
PHONE:	
TYPE OF COMMITTEE (PAC or Ballot Question): If you are a ballot question committee, please also indicate the measure which you supporting or opposing.	are
Date:	A:
Signature of person submitting voluntary registra	เเดท

19

www.state.sd.us/sos

Corporations (605) 773-4845 Fax (605) 773-4550